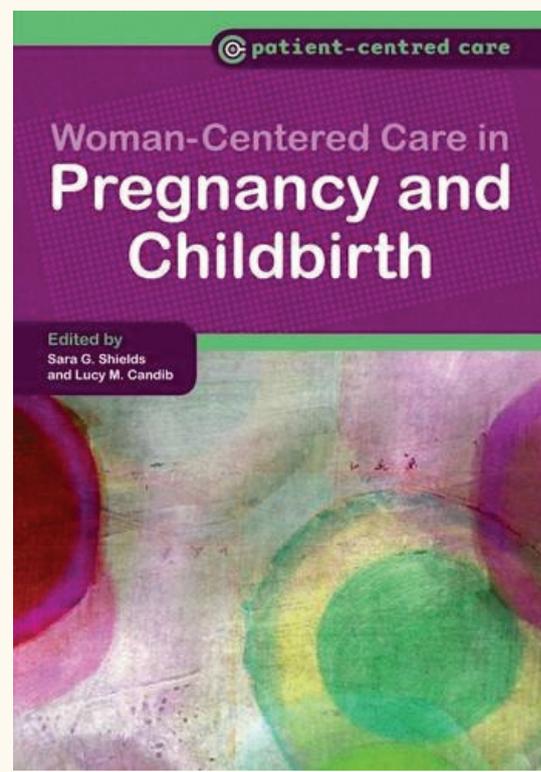


Woman-Centered Care in Pregnancy and Childbirth

Editors: Sara G. Shields and Lucy M. Candib
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العناية المرتكزة على المرأة أثناء الحمل والولادة

المحررون : سارة شيلدز ولوسي كاندب



WOMAN-CENTERED CARE IN Pregnancy and Childbirth provides lay women as well as professionals, obstetricians, midwives and general care physicians with valuable information on the normal process of pregnancy and childbirth. The text incorporates dozens of clinical vignettes (patient stories) describing how a varied group of clinicians approach the specifics of woman-centered care.

They work with many women from a variety of social, cultural, and economic situations who face both normal situations and challenges from the inception of their pregnancies onwards.

The authors justify their title, Woman-Centered care as a necessary reaction, first, to technology centered care where the pressure of modern technology which forces institutions to use more machines to reduce labour costs. Second, the title is also in reaction to physician controlled care in pregnancy and child birth and their preoccupation with malpractice suits leading to a leap in interventions. For those clinicians who were trained without all these gadgets and trends these are understandably good arguments.

Family-centered care is another approach to labour and delivery which happens to a large extent in Asian and Middle Eastern countries, but is not possible for women who are single, lesbian, or drug users etc, in a western population. In family-centered care, men can exert emotional control over the lives of women and children and one of the examples being a husband denying a woman an epidural anaesthesia for pain relief.

The authors also present how care is becoming fetal-centered with the advancing technology of ultrasound and fetal monitoring in labour and how fetocentric care can obscure the needs of the pregnant woman.

This book is written to promote the practice of maternity care in the context of the woman- where she comes from, where her partner comes from and

how the baby fits into that context. There are a lot of case vignettes and narratives that makes the book interesting to read.

The authors have divided the book into seven sections. Part one addresses the magnitude of the problem. Other six chapters detail the normal process of pregnancy and its problems, women experiencing miscarriage, fetal anomalies, preterm labour, cesarean sections, etc. There are also chapters on the cultural issues that arise when caring for immigrant women, on prevention and health promotion and on the importance of woman centeredness in family planning and contraception.

The final chapter focuses on team work and wise stewardship of resources and the worldwide increase in cesarean sections and the efforts to reverse it. The goal of the authors is to combine practical, woman-centered, evidence-based perspectives that trainees and fully-fledged clinicians can apply

in clinical practice in order to strengthen the healing relationship, make it easier to provide good pregnancy and child birth care and lead to women's self empowerment.

On the whole, this book is a very interesting read for patients, physicians and anyone interested in the care of women without the overuse of technology. It is a heavy volume to carry, but nevertheless worth reading.

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